

BEFORE THE ARKANSAS WORKERS' COMPENSATION COMMISSION
WCC NO. G107174

Judy Melton, EMPLOYEE	CLAIMANT
Clarksville School District, EMPLOYER	RESPONDENT #1
AR School Boards Association, CARRIER/TPA	RESPONDENT #1
Death & Permanent Total Disability Trust Fund	RESPONDENT #2

AMENDED OPINION FILED SEPTEMBER 28, 2021

Claimant represented by EDDIE H. WALKER, JR., Attorney at Law, Fort Smith, Arkansas.

Respondent No. 1 represented by MELISSA WOOD, Attorney at Law, Little Rock, Arkansas.

Respondent No. 2 represented by CHRISTY KING, Attorney at Law, Little Rock.

STATEMENT OF THE CASE

Subsequent to the Appeal of an Opinion filed June 16, 2021, Claimant filed a Motion to Supplement the Record and the Full Commission granted that motion and remanded the case to the Administrative Law Judge for the purpose of taking additional evidence prior to the Commission rendering a decision regarding the appeal that is currently pending before the Commission. The Full Commission has such authority pursuant to ACA § 11-9-704(b)(7).

After conferring with the attorneys for the parties, it is determined that an evidentiary hearing is not necessary in order

for the Administrative Law Judge to deliver to the Full Commission the additional information needed for it to render a decision regarding the matters that are currently on appeal.

By agreement of the parties, the record of the hearing that was held on March 18, 2021 is hereby supplemented by adding a copy of the Opinion filed October 30, 2018 as Commission Exhibit 2, a July 15, 2021 letter from Melissa Wood as Commission Exhibit 3, an August 18, 2021 letter from Melissa Wood as Commission Exhibit 4 and an August 18, 2021 email from Christy King as Commission Exhibit 5. From a review of the record as a whole, including the additional exhibits that now supplement the record, as well as the positions of the parties as stated by the attorneys of record, the following findings of fact and conclusions of law are made in accordance with ACA § 11-9-704:

FINDINGS OF FACT & CONCLUSIONS OF LAW

1. Issue 3 as stated in the Opinion filed June 16, 2021, and any reference thereto stated in that Opinion, are hereby stricken based upon the parties' agreement that medical treatment was not actually an issue to be determined as part of the March 18, 2021 hearing.

2. Findings of Fact & Conclusion of Law #4 is hereby vacated


and determined to be null and void.

3. All other Findings of Fact & Conclusions of Law set forth in the Opinion filed June 16, 2021 remain subject to review by the Full Commission.

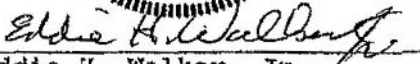
ORDER

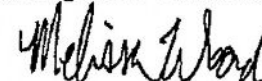
The Opinion filed June 16, 2021 is hereby amended as set forth above and all other aspects of that Order remain subject to review as set forth in the Appeal and Cross Appeal that have already been filed in the case.




Eric Paul Wells
Administrative Law Judge

AGREED TO AND APPROVED BY:


Eddie H. Walker, Jr.
Attorney for Claimant


Melissa Wood
Attorney for Respondent No. 1


Christy King
Attorney for Respondent No. 2

BEFORE THE ARKANSAS WORKERS' COMPENSATION COMMISSION

WCC NO. G107174

JUDITH MELTON, Employee	CLAIMANT
CLARKSVILLE SCHOOL DISTRICT, Employer	RESPONDENT
ARKANSAS SCHOOL BOARD ASSN., Insurance Carrier/TPA	RESPONDENT

OPINION FILED OCTOBER 30, 2018

Hearing before ADMINISTRATIVE LAW JUDGE ERIC PAUL WELLS in Fort Smith, Sebastian County, Arkansas.

Claimant represented by EDDIE H. WALKER, JR., Attorney at Law, Fort Smith, Arkansas.

Respondents represented by MELISSA WOOD, Attorney at Law, Little Rock, Arkansas.

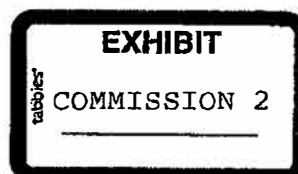
STATEMENT OF THE CASE

On August 2, 2018, the above captioned claim came on for a hearing at Fort Smith, Arkansas. A pre-hearing conference was conducted on June 6, 2018, and a Pre-hearing Order was filed on June 6, 2018; an Amended Pre-hearing Order was filed on July 19, 2018. A copy of the Amended Pre-hearing Order has been marked Commission's Exhibit No. 1 and made a part of the record without objection.

At the pre-hearing conference the parties agreed to the following stipulations:

1. The Arkansas Workers' Compensation Commission has jurisdiction of this claim.
2. On all relevant dates, the relationship of employee-employer-carrier existed between the parties.
3. The claimant sustained a compensable injury on August 19, 2011 to her head, neck, back, and left elbow.
4. The claimant is entitled to a weekly compensation rate of \$575.00 for temporary total disability and \$431.00 for permanent partial disability.

By agreement of the parties the issues to litigate are limited to the following:



1. Whether claimant is entitled to medical treatment by or at the direction of Dr. Rosenzweig including, but not limited to, radiofrequency denervation to her back.

The claimant's contentions are as follows:

"A. The claimant contends that she has undergone prior radio frequency ablations at the direction of Dr. Rosenzweig and that he is now recommending that said treatment be repeated.

B. The claimant contends that the previous procedures improved her condition and that therefore repeating the procedures constitute reasonably necessary medical treatment.

C. The claimant reserves her right to litigate whether her right knee was injured on or about August 19, 2011."

The respondents' contentions are as follows:

"Respondents contend that the procedure recommended by Dr. Rosenzweig did not pass pre-certification. Additional information was requested from Dr. Rosenzweig. He has failed to appeal the pre-certification denial. It is respondents' position that they are in need of the additional information in order to submit an appeal for the procedure."

The claimant in this matter is a 63-year-old female who sustained compensable injuries to her head, neck, back and left elbow on August 19, 2011. The claimant has asked the Commission to consider her entitlement to medical treatment by or at the direction of Dr. Rosenzweig, including, but not limited to radiofrequency denervation to her back. At the hearing, the claimant was asked about how she came to be treated by Dr. Rosenzweig and some of the course of treatment he provided her as follows:

Q And how did you end up under the care of Dr. Rosenzweig?

A My treating physician at Clarksville at the clinic recommended Dr. — he recommended for me to see someone else about my back and Workmen's comp sent me to Dr. Rosenzweig.

Q So the Workers' Compensation insurance people actually chose Dr. Rosenzweig; is that —

A Yes.

Q -- correct?

A They did.

Q And how long has Dr. Rosenzweig been treating you?

A Since I first went to him after the accident. I don't remember which month I started, but it was pretty close to October or November of that year, I believe.

Q So several years?

A Yes, sir, he's been treating me for several years.

Q We've got Dr. Rosenzweig's medical records, and it appears that in May of 2015 he did a SI joint injection, and then on the August 11, 2015, visit he suggested what's called a radiofrequency denervation.

Do you recall that period of time?

A Not clearly, but I do remember when it happened.

Q Well, do you recall that you have actually undergone some radiofrequency denervations?

A Yes, sir, I did.

Q And did those procedures have any effect on you, as far as you can tell?

A Yes, sir, they have always helped tremendously.

Q And how long does that improvement typically last?

A Usually upwards of a year.

Q Now, it appears that on page five of Claimant's Exhibit 1, the radiofrequency denervation was suggested as a procedure that ought to be done, but it wasn't eventually approved until March of 2016, several months later.

Do you recall there being a delay in getting that procedure approved?

A Yes, sir. They would -- Systemedic, I believe, was the carrier/handler, and they would deny it, and then they would go back, the doctor would appeal their decision, and then they would do something called a peer to peer review or a board review, and then they would end up reviewing and approving the procedure.

Q So once that procedure was eventually approved, there is a note from Dr. Rosenzweig at page 17 on March 31, 2016, that says that the radiofrequency procedure resolved your sacral iliac pain.

A Yes, sir.

Q Do you agree with that?

A Yes, sir.

Q And about how long would you say that probably lasted?

A I would say at least six months to a year.

Q It looks like in April of 2017, he again recommends a radiofrequency denervation. Does that sound about right; about a year later?

A Yes, sir.

Q And did you undergo that procedure in 2017?

A I believe it was in April.

Q And the records indicate that you may have had some immediate problem after the injections, but then there are other records that say later you got relief.

Do you remember anything about that?

A Yes, sir. A couple of times when he would inject me, he thought he hit a bone, and it felt like someone kicked me in the rear end for about the first week and a half or two weeks, but the SI joint pain was better, but that pain – it felt like I had been kicked.

Q And how long did it take for that sensation to go away?

A About a week and a half, up to two weeks.

Q And once that went away, what is your impression of whether or not the radiofrequency denervation was successful?

A It was successful. I felt just so much better.

Q And so about a year later, he again talks about a radiofrequency denervation, but he says that you asked for it. Did you ask him for another one?

A Yes, sir. When I went in hurting, I asked him couldn't he do what he had done in the past.

Q And then he recommended this radiofrequency denervation in 2018?

A Yes, sir.

Q And that has not been approved?

A No, sir.

On March 31, 2016, the claimant was seen by Dr. Kenneth Rosenzweig at Orthopaedic Spine & Sports in Little Rock, Arkansas. Following is a portion of Dr. Rosenzweig's report found at claimant's Exhibit 1, Page 17:

HISTORY OF PRESENT ILLNESS:

Ms. Melton returns in follow-up of redo radiofrequency of the sacroiliac joints bilaterally. She states today that she is doing well but still has knee pain. She is sleeping better. She recalls a fall on March 29 and landed on her hip pointing to the greater trochanteric area. It did not seem to aggravate her back pain. She states that she is doing well at work as long as she does not do any traveling for field trips or significant playground duties. Her main complaint is pain with respect to the right total knee revision surgery she has residual discomfort. She is happy to report that her back pain is feeling much better.

IMPRESSION:

Resolved sacroiliac pain with radiofrequency with no complaints of back pain.

On March 2, 2018, the claimant saw Dr. Rosenzweig. Following is a portion of his report found at Claimant's Exhibit 1, pages 64-65:

HISTORY OF PRESENT ILLNESS:

Ms. Melton is a 63-year-old workers' compensation claimant. She is still having difficulty with the right total knee revision. She has not restored her motion. She is still having pain and swelling. She is under the care of Dr. Chris Arnold in Fayetteville for her knee. She is having ongoing difficulty with her back and buttock pain on the left. The pain has recently become very intense. She is having deep burning pain. She has been taking gabapentin. She feels like she is gaining weight from the gabapentin and wants to wean off. She wants to change her non-steroidal medication to something different from Naproxen. She states that with her knee she was in rehab and had a lot swelling and warmth develop. She may have

developed some loosening of her joint. She had a recent bone scan which appears to be benign. The knee swells and is hot to touch. With her ongoing struggle with her knee rehab and gait disturbance she is having increasing back pain and buttock pain in the SI joint area. She does not want a trigger controlling her pain for a duration. Her last radiofrequency was performed in April and May of 2017. She is not quite a year out.

PLAN/RECOMMENDATION:

A redo radiofrequency is recommended to get her pain under better control. We will submit a request to redo her radiofrequency. I had hoped to delay any formal treatment for her back until she had recovered from her knee surgery. She has an ongoing gait disturbance which may challenge treatment for her back. She is aware of this, but it is still a difficulty for her. Pending approval, we will proceed with redo radiofrequency of the SI joints, left followed by right.

On April 4, 2018, the claimant's request for radiofrequency denervation was reviewed by Dr. William Tontz, Jr. at Medical Review Institute of America, LLC at the respondent's request. Following is a portion of Dr. Tontz' report found at Respondent's Exhibit 1, Pages 20-21:

Summary of Treatment/Case History:

The patient is a 63 year old female who reported knee pain. The patient is status post a radiofrequency ablation (RFA) performed in April 2017 with good relief. The examination note dated 3/2/18 demonstrated tenderness of the sacroiliac (SI) joint (left greater than right). Tenderness is noted over the posterior superior iliac spine (PSIS), bilaterally. A request was made for a redo radiofrequency ablation.

Conclusion:

The proposed redo radiofrequency ablation of the bilateral sacroiliac (SI) joints are not medically appropriate or indicated at this time.

On May 9, 2018, the claimant was seen by Dr. Rosenzweig. Following is a portion of his report found at Claimant's Exhibit 1, Pages 68-69:

HISTORY OF PRESENT ILLNESS:

Ms. Melton is a 63-year-old school teacher who is out on leave after revision reconstruction surgery of her right total knee arthroplasty. She is having increasing back pain. She asked

that we revisit her SI joint radiofrequency. This was submitted and was not approved by the insurance company review mechanism. Meanwhile, Ms. Melton's pain is becoming more difficult with respect to her lower back. She has been exercising in a warm water pool which does help her. She had recent sinus surgery unrelated to her workers' compensation claim.

Meanwhile, she reports her knee is feeling better. She feels like she is walking better. She attributes the rehab she could do in warm water as the catalyst to her improvement.

PLAN/RECOMMENDATION:

Her previous injection to the SI joint was very effective from a diagnostic and therapeutic standpoint. The radiofrequency has been effective in keeping her pain under control for an extended period of time. She has had all of the above managed for some time. She has had lumbar radiofrequency performed in 2014, SI joint radiofrequency performed in 2016.

The pain she is having now is SI joint pain. She had a redo radiofrequency of her SI joint one year ago in May of 2017. It is now May 2018 and she has requested to have this redone. If necessary, we could perform a confirmatory block regarding the indication for the redo radiofrequency and SI joint which has up to now been effective in controlling her pain. In my estimation it is appropriate from a medical necessity standpoint to offer repeat radiofrequency to keep her pain under control.

The treatment options for SI joint pain are repeated injections with radiofrequency versus arthrodesis. I have not recommended an arthrodesis for this is likely to be an ongoing issue for her and may place some torque above and/or below. The radiofrequency is a minimally invasive non-surgical technique in controlling her pain by ablating the pain fibers from the joints. This is additionally very effective in treating axial spine pain as well as sacroiliac joints. The history of this claimant supports these opinions and it is certainly reasonable to offer continued treatment.

On May 17, 2018, the claimant was seen by Dr. Rosenzweig. Following is the body of a letter authored by Dr. Rosenzweig found at Claimant's Exhibit 1, Pages 71-72:

To Whom It May Concern:

This letter is written on behalf of Ms. Judy Melton. Ms. Melton is a school teacher who has been impaired in her ability to remain gainfully employed for the past couple of years due to complications from a total knee arthroplasty. She had to have

the revision revised yet again. The gait disturbance has aggravated her low back pain below her waist in the area of the SI joints.

She has had radiofrequency of the lumbar spine performed years ago and more recently radiofrequency of the SI joints which appears more effective in addressing her pain generator. Her last radiofrequency was one year ago. She has asked that we repeat the radiofrequency for her pain control. She asked me to appeal the decision of the denial request.

The treatment for the SI joint has a source of pain has been successful with respect to her pain relief despite her gait disturbance from her total knee has had further surgery. [sic] There has been a struggle with rehab to restore her motion and strength. The ongoing gait disturbance is a constant irritant and aggravation to the sacroiliac joints. With the SI joints as a source of pain, she has asked that we revisit her SI joints with the radiofrequency that has helped the pain that she is currently having for the past couple of years.

If required, we could submit for a confirmatory block to confirm that this is her pain which is not medically necessary if the pain returns in the same area of previous relief from previous treatment within the one year time frame.

Please reconsider the denial for the treatment of Ms. Melton's sacroiliac joint pain that continues to be aggravated by a gait disturbance from the rehabilitation of a total knee arthroplasty. If I can submit further information regarding the indication or the medical necessity of this treatment, I am happy to coordinate that for you, but her pain is felt to be sacroiliac.

Other treatment options include surgical arthrodesis or repeated injections. Ms. Melton's preference is not to have further surgery. Repeated injections are something that can be offered but can be mitigated by the radiofrequency which should hold her pain in check for an extended period of time.

On June 22, 2018, the claimant's request for radiofrequency denervation was reviewed by Dr. Tontz. Following is a portion of Dr. Tontz' report found at Respondent's Exhibit 1, Pages 25-26:

Summary of Treatment/Case History:

This patient is a 63 year old female with reported knee pain. The patient is status post a radiofrequency ablation (RFA) performed in April of 2017 with good relief. The examination note dated 03/02/18 demonstrated tenderness of the sacroiliac (SI) joint (left greater than right). Tenderness is noted over the posterior superior iliac spine (PSIS), bilaterally. A request was

made for a redo radiofrequency ablation.

Conclusion:

The proposed bilateral sacroiliac (SI) joint radiofrequency nerve ablation are not medically indicated or appropriate for this patient.

The claimant's husband was called to testify by the claimant's attorney regarding her improvement and condition after undergoing prior radiofrequency denervation. Following is a portion of Mr. Ted Melton's testimony regarding his wife's condition:

Q And are you the husband of Ms. Judy Melton?

A Yes, sir.

Q I'm not going to ask you when you got married but approximately how long have you been married?

A We got married December 1st, 1972.

Q Are you around her on a regular day-to-day basis?

A Yes, sir.

Q Do you recall her undergoing procedures that have been identified as radiofrequency denervation?

A Yes, sir.

Q Did you have a chance to observe her activity level before and after each of those procedures?

A Yes, I did.

Q Comparing her activity levels before she would undergo one of those procedures with her activity level after she had undergone one of those procedures, just basically explain to us whether there was any difference in her activity levels.

A Well, before, she would be hurting, and she couldn't do things. She couldn't get comfortable, squirming; wherein after she has one, then as well as she can, she's back to normal activity. I mean she has to be careful what she does because she don't feel, you know, she could hurt herself, but it's just a complete 180. You know, it's just like going from where I have to stay sit down and stuff, can't do anything, to going back to being active for the state she's in, physically able.

Q How long would that apparent improvement typically last?

A Six months; maybe a year, you know.

The claimant has been successfully treated by the radiofrequency denervation on two occasions in the past. Both her testimony and her husband's testimony appear to be credible in the fact that the claimant's complaints of pain were greatly reduced for a six months to one year time period after the procedure. Certainly, the radiofrequency denervation has a much longer lasting effect than the injections that have been provided to the claimant. Dr. Rosenzweig has treated the claimant since nearly the initiation of her treatment for her compensable injuries. In reviewing all of the medical documents submitted into evidence, including the pre-certification denials introduced by the respondent, it seems clear to this Administrative Law Judge that the recommendations of Dr. Rosenzweig, including the radiofrequency denervation, are reasonable and necessary medical treatment for the claimant's compensable back injury.

From a review of the record as a whole, to include medical reports, documents, and other matters properly before the Commission, and having had an opportunity to hear the testimony of the witnesses and to observe their demeanor, the following findings of fact and conclusions of law are made in accordance with A.C.A. §11-9-704:

FINDINGS OF FACT & CONCLUSIONS OF LAW

1. The stipulations agreed to by the parties at the pre-hearing conference conducted on June 6, 2018, and contained in an Amended Pre-hearing Order filed July 19, 2018, are hereby accepted as fact.
2. The claimant has proven by a preponderance of the evidence that the medical treatment by or at the direction of Dr. Rosenzweig including, but not limited to, radiofrequency denervation to her back is reasonable and necessary medical treatment for her compensable injury.

ORDER

The respondents shall be responsible for paying for the cost for the treatment associated with the recommendations of Dr. Rosenzweig regarding the claimant's treatment including, but not limited to, the radiofrequency denervation of her back.

If they have not already done so, the respondents are directed to pay the court reporter, GLENDA WOODS, fees and expenses within thirty (30) days of receipt of the invoice.

IT IS SO ORDERED.


ERIC PAUL WELLS
ADMINISTRATIVE LAW JUDGE



WORLEY, WOOD & PARRISH, P.A.

LAW OFFICES

1318 S. Main, Suite 200
Little Rock, Arkansas 72202
(501) 225-3535, Ext. 106
FAX (501) 225-6026

Melissa Wood

melissa.wood@wvp-lawfirm.com

July 15, 2021

via_greta@fortsmithlaw.com

Eddie Walker
Walker, Shock, & Harp
PO Box 998
Fort Smith, AR 72902

Re: Judith Melton v. Clarksville School District
WCC File No.: G308645
Our File: Clarksville; Melton; Judy (27642)

Dear Eddie:

This is to confirm that my client only denied the massage therapy recommended by Dr. Rosenzweig. We were under the impression that that was the only issue recently litigated. The adjuster will continue to approve reasonable and necessary treatment with Dr. Rosenzweig.

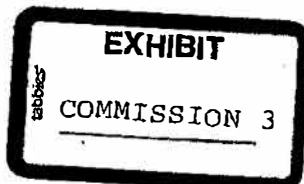
Sincerely,



Melissa Wood

MW:pgh

cc: Christy King – [Via Email: Christy.king@arkansas.gov](mailto:Christy.king@arkansas.gov)



BEFORE THE ARKANSAS WORKERS' COMPENSATION COMMISSION
WCC FILE NO: G107174

Judy Melton, EMPLOYEE	CLAIMANT
Clarksville School District, EMPLOYER	RESPONDENT
AR School Boards Association, CARRIER/TPA	RESPONDENT NO. 1
Death & Perm. Total Dis. Trust Fund	RESPONDENT NO. 2

BRIEF IN SUPPORT OF CLAIMANT'S MOTION TO SUPPLEMENT RECORD

Dr. Rosenzweig has been the Claimant's authorized treating physician for almost a decade because of the serious nature of the Claimant's injuries and the ongoing symptoms and need for treatment that have resulted from those injuries.

ACA § 11-9-508(a)(1) provides that an employee who sustains a compensable injury is entitled to reasonably necessary medical treatment. It does not condition entitlement to medical treatment on whether the Claimant is still within his or her healing period.

It is well settled law in Arkansas that even after an injured worker reaches the end of their healing period that injured worker may be entitled to medical care to maintain the level of improvement that has been reached as a result of active medical treatment. Accordingly, medical maintenance and pain management are routinely provided injured workers who have sustained severe enough injuries to justify such treatment.

Since an Opinion was previously filed in this case on October 30, 2018 specifically addressing whether treatment by or at the direction of Dr. Rosensweig was reasonably necessary, the parties did not request, nor anticipate, that the Judge would sua sponte address whether additional treatment by Dr. Rosensweig was reasonably necessary. Rather, the parties stipulated that the Opinion filed October 30, 2018 was res judicata and the law of the case. The Respondent's Pre Hearing Questionnaire indicates that the only issue regarding medical treatment that they were aware of was the question of massage therapy.

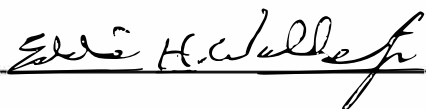
Notwithstanding the fact that massage therapy was the only aspect of treatment that was ripe for decision, the Administrative Law Judge basically concluded that further medical care by Dr. Rosenweig is not reasonably necessary.

By sua sponte deciding the issue of additional treatment by Dr. Rosensweig, when no party had identified it as an issue and when it had been specifically stipulated that the Opinion filed October 30, 218 was res judicata and the law of the case, the Administrative Law Judge violated the parties' due process rights and prevented them from having an opportunity to develop the record as it might apply to Claimant's entitlement to additional medical

treatment by Dr. Rosensweig.

In order for the Record to be complete and fully reflective of the status of the case at the time it was presented to be heard, the Claimant respectfully submits that the Opinion filed October 30, 2018 and the July 15, 2021 letter from attorney Melissa Wood should be added to the record as supplemental exhibits.

Respectfully submitted:

By: 

Eddie H. Walker, Jr.
Arkansas State Bar No. 78157
Attorney for Claimant
WALKER LAW GROUP, PLC
P.O. Box 998
Fort Smith, AR 7202-0998
PH: (479) 783-5000
FAX: (479) 783-0420
EMAIL: ewalker@fortsmithlaw.com

Certificate of Service

I certify that a true and correct copy of the foregoing Claimant's Motion to Supplement the Record as delivered to the following parties and/or counsel therefore by email or deposit in the U.S. Mail with sufficient postage affixed thereto, addressed as shown on the date indicated below.

08-06-2021
Date

Eddie H. Walker, Jr.
Eddie H. Walker, Jr.

VIA EMAIL ONLY: melissa.wood@wvp-lawfirm.com
Ms. Melissa Wood
Attorney at Law
Worley, Wood & Parrish, P.A.
1318 S. Main, Suite 200
Little Rock, AR 72202

VIA EMAIL ONLY: christy.king@awcc.state.ar.us
Ms. Christy King
Death & Permanent Disability Trust Fund
Workers' Compensation Commission
P.O. Box 950
Little Rock, AR 72203

WORLEY, WOOD & PARRISH, P.A.

LAW OFFICES
1318 S. Main, Suite 200
Little Rock, Arkansas 72202
(501) 225-3535, Ext. 106
FAX (501) 225-6026

Melissa Wood

melissa.wood@wwp-lawfirm.com

August 18, 2021

via email: Philip.hood@arkansas.gov,
beverly.keathley@arkansas.gov, marlene.braggs@arkansas.gov
& Deborah.flenory@arkansas.gov

Mr. Philip Hood, Clerk
Workers' Compensation Commission
P. O. Box 950
Little Rock, AR 72203

Re: Judith Melton v. Clarksville School District
WCC File No.: G107174
Our File: Clarksville; Melton; Judy (27642)

Dear Mr. Hood:

I am in receipt of the Motion to Supplement the Record filed by Claimant in this matter. Respondents No. 1 have no objection.

Thank you, Mr. Hood.

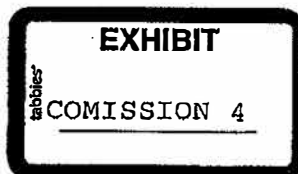
Sincerely,



Melissa Wood

MW:pgh

cc: Eddie Walker - via_greta@fortsmithlaw.com
Christy King - [via Christy.king@arkansas.gov](mailto:via_Christy.king@arkansas.gov)



file

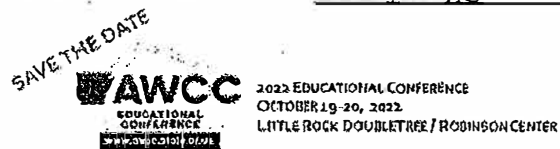
Greta

From: Christy King <Christy.King@arkansas.gov>
Sent: Wednesday, August 18, 2021 10:25 AM
To: Trese Martin; Philip Hood
Cc: Deborah Flenory; Beverly Keathley; Marlene Braggs; Eddie Walker; Greta
Subject: RE: G107174 Melton

The Trust Fund has no objection to the Claimant's Motion to Supplement the Record.

Thank you,

Christy King
Attorney at Law
(501) 682-2533
NEW E-MAIL ADDRESS: Christy.King@Arkansas.gov

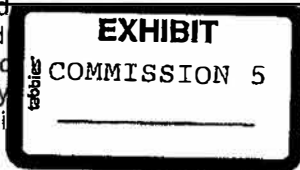


From: Trese Martin <Trese.Martin@wwp-lawfirm.com>
Sent: Wednesday, August 18, 2021 10:21 AM
To: Philip Hood <Philip.Hood@arkansas.gov>
Cc: Deborah Flenory <Deborah.Flenory@arkansas.gov>; Beverly Keathley <Beverly.Keathley@arkansas.gov>; Marlene Braggs <Marlene.Braggs@arkansas.gov>; Christy King <Christy.King@arkansas.gov>; Eddie Walker <ewalker@fortsmithlaw.com>; Greta <Greta@fortsmithlaw.com>
Subject: G107174 Melton

Trese Martin, Paralegal
Worley, Wood, & Parrish, P.A.
1318 S. Main
Suite 200
Little Rock, AR 72202

P#501-225-3535 ext 100
F#501-225-6026
trese.martin@wwp-lawfirm.com

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From: Melissa Wood <Melissa.Wood@wwp-lawfirm.com>

Sent: Wednesday, August 18, 2021 10:05 AM

To: Trese Martin <Trese.Martin@wwp-lawfirm.com>

Subject: (27642) Clerk 03.pdf.pdf

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